| (Re | questor's Name) | |
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| (Ad | dress) | |
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| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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Account#: 120000000088

| Date: October 4, 2017 | Account#. 12000000086 |
|--|---|
| Name: Marisa Kugelmann | _ |
| Reference #: C020063 | |
| Entity Name: DIAL WORLD CO | MMUNICATIONS, LLC |
| Articles of Incorporation/Authori | ization to Transact Business |
| ✓ Amendment | |
| Change of Agent | De man tains |
| Reinstatement | * Please retain original file date * |
| Conversion | 8 |
| ☐ Merger | |
| ☐ Dissolution/Withdrawal | |
| Fictitous Name | |
| Other | |
| | |
| Authorized Amount: \$25.00 Signature: W. + 2 | |
| Signature. My | |

€ CORPORATE HQ

COGENCY GLOBALING: 10 E 40 - \$7,10 FE NY 11Y 16016 800.221.0102 +1,212.947.7200 **ŒEUROPEAN HQ**

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COGENICY GLOBAL (HK) LIMITED ANTIG CONFACY INFINITUS PLAZA, 12 MF. 199 DES YOEUX PD CENTRAL HONG KONG (NBC) 1852,3975,1803



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COVER LETTER

| TO: Registration Division o | n Section f Corporations | | |
|-----------------------------|--|---------------------------------|--|
| SUBJECT: | | COMMUNICATIONS, | |
| | Name of Foreign | ı Limited Liability Con | npany |
| Dear Sir or Madan | n: | | |
| The enclosed appl | ication, certificate and fee(s) | are submitted for filing | |
| Please return all co | orrespondence concerning this | s matter to the followin | ā: |
| | Leonard Bittner | | |
| | Name of Person | | |
| DIAL W | ORLD COMMUNICATIONS | LLC | |
| | Firm/Company | | |
| 3 | 0591 LONGHORN DRIVE | | |
| | Address | | |
| CAN | IYON LAKE. CA 92587-764 | 8 | |
| | City/State and Zip Code | | |
| | _en@DialWorldCom.com | | |
| E-mail address: | (to be used for future annual | report notification) | |
| For further inform | ation concerning this matter, p | olease call: | |
| Le | onard Bittner | at (760) | 533-9988 |
| Na | me of Person | \ / | ime Telephone Number |
| STREET/ | COURIER ADDRESS: | MAI | LING ADDRESS: |
| Registratio | | | stration Section |
| Division o Clifton Bu | f Corporations | | ion of Corporations Box 6327 |
| | nding utive Center Circle | | hassee, Florida 32314 |
| | e. Florida 32301 | - | |
| | k for the following amount: | | |
| ∑ \$25 Filing Fee | S30 Filing Fee & Certificate of Status | S55 Filing Fee & Certified Copy | : ☐ \$60 Filing Fee, Certificate of Statu Certified Copy |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

| 1. Name of limited liability Company as it appears of | on the records of the Florida | Department of | |
|---|--|---|--|
| State: DIAL WORLE | D COMMUNICATIONS, LL | C | |
| Enter new principal office address, if applicable: | | HORN DRIVE | |
| (<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>) | CANYON LAKE | . CA 92587-764 | 48 |
| Enter new mailing address, if applicable: (Mailing address | 30591 LONG | HORN DRIVE | |
| MAY BE A POST OFFICE BON | CANYON LAKE, CA 92587-7648 | | |
| 2. The Florida document number of this limited liabi | ility company is: | M0900000321 | 7 31,1510H (F. F. |
| 3. Jurisdiction of its organization: | Delaware | | 일 의 |
| 4. Date authorized to do business in Florida: | August 19, 2009 | | |
| SECTION II (5-9 complete only the applicable ch | | | = = |
| 5. New name of the limited liability company: (must c | contain "Limited Liability Co | mpany, " "L.L.C | C. " or "LLC\$) |
| (If name unavailable, enter alternate name adopted for copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.IC." | iging members adopting the a | business in Flor Iternate name, T | ida and attach a he alternate name |
| 6. If amending the registered agent and/or registered registered agent and/or the new registered office add | | ls. <u>enter the nam</u> | e of the new |
| Name of New Registered Agent: | COGENCY GLOBAL | INC. | |
| New Registered Office Address: | 115 North Calhoun St., | Suite 4 | |
| | | la Street Addres. | |
| | Tallahassee | Florida | Zip Code |
| New Registered Agent's Signature, if changing Regit I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper as and accept the obligations of my position as register document is being filed to merely reflect a change in liability company has been notified in writing of this | and agree to act in this capa nd complete performance of red agent as provided for in C the registered office addres: | my duties, and I Chapter 605, F.S s, I hereby confi | am familiar with . Or, if this rm that the limited |

| . If the amendmer | it changes person, title or capacity in ac | ecordance with 605,0902 (1)(e), indicate that | change: |
|-------------------|--|---|-----------------------|
| itle/ Capacity | <u>Name</u> | Address | Type of Action |
| MGRM | VALME, RAYMOND | 19109 S.W. 80TH COURT | Add |
| | | MIAMI, FL 33157 | 🔀 Remove |
| | | | Add |
| | | | Remove |
| | | | 1750CT -4 |
| | | | ADCT - Lemane HIII: 1 |
| | | | Add = |
| | | | Remove |
| | | | Add |
| | | | Remove |
| aforementioned | rtificate, if required; no more than 90 amendment(s), duly authenticated by or the law of which this entity is organ | the official having custody of records in the | • |
| | /S/ Leonard | Bittner the authorized representative | |

1. 1. 1.

Filing Fee: \$25.00